## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

0823-0038

| CLAIMS AS FILED - PART I (Column 1)   |                |   |                           |              |                              | mn 2)            |          | SMALL ENTITY TYPE   |                        |    | OTHER THAN SMALL ENTITY |                        |
|---|----------------|---|---------------------------|--------------|------------------------------|------------------|----------|---------------------|------------------------|----|-------------------------|------------------------|
| TOTAL CLAIMS  |                |   | 27                        |              |                              |                  | Γ        | RATE                | FEE                    |    | RATE                    | FEE                    |
| FOR   |                |   | NUMBER FILED              |              | NUMBER EXTRA                 |                  |          | BASIC FEE           | 355.00                 | OR | BASIC FEE               | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |                |   | 73 minus 20=              |              | * 3                          |                  |          | X\$ 9=              |                        | OR | X\$18=                  | 54                     |
| INDEPENDENT CLAIMS  |                |   | Ψ minus 3 =               |              | *                            | 1                |          | X40=                |                        | OR | X80=                    | 80                     |
| MU  | LTIPLE DEPEN   | DENT CLAIM P                              | RESENT                    |              |                              |                  |          | +135=               |                        | OR | +270=                   |                        |
| * If  | the difference | in column 1 is                            | less than zero, enter "0" |              |                              | in column 2      |          | TOTAL               |                        | OR | TOTAL                   |                        |
| CLAIMS AS AMENDED - PART II   |                |   |                           |              |                              |                  |          |                     |                        |    | OTHER THAN SMALL ENTITY |                        |
|   |                | (Column 1)                                | T                         | (Colu        |                              | (Column 3)       |          | SMALL               |                        | OR | SMALL                   |                        |
| AMENDMENT A   | 1.             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | en <sup>to</sup> .        | PREVI        | BER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *   | Minus                     | **           |                              | =                |          | X\$ 9=              |                        | OR | X\$18=                  |                        |
|   | Independent    | *   | Minus                     | ***          | T CL AIM                     | =                |          | X40=                |                        | OR | X80=                    |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                |   |                           |              |                              |                  |          | +135=               |                        | OR | +270=                   |                        |
|   |                |   | •                         | ٠            |                              |                  | _        | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE     |                        |
|   |                | (Column 1)                                |                           | (Colu        | mn 2)                        | (Column 3)       | •        |                     |                        |    |                         |                        |
| AMENDMENT B   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                           | NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *   | Minus                     | **           |                              | =                |          | X\$ 9=              |                        | OR | X\$18=                  |                        |
|   | Independent    | *   | Minus                     | ***          |                              | -                |          | X40=                |                        | OR | X80=                    |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                |   |                           |              |                              |                  |          | +135=               |                        | OR | +270=                   |                        |
|   | •              |   |                           |              |                              |                  |          | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE     |                        |
|   |                | (Column 1)                                |                           |              | mn 2)                        | (Column 3)       | _        |                     |                        | •  | A0011.1 CE              |                        |
| AMENDMENT C   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                           | NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *   | Minus                     | **           |                              | =                |          | X\$ 9=              |                        | OR | X\$18=                  | :                      |
|   | Independent    | *   | Minus                     | ***          | T CL AUA                     | =                |          | X40=                |                        | OR | X80=                    |                        |
| <u> </u>  | FIRST PRESE    | NTATION OF M                              | ULTIPLE DE                | 'ENDEN       | I CLAIM                      |                  | <b>」</b> | +135=               |                        | OR | +270=                   |                        |
|   |                | mn 1 is less than t                       |                           |              |                              |                  | L        | TOTAL               |                        |    | TOTAL                   |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |   |                           |              |                              |                  |          |                     |                        |    |                         |                        |